

<b>POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	<b>Application Number</b>	10/580,999
	<b>Filing Date</b>	March 12, 2007
	<b>First Named Inventor</b>	Ljubimova, Julia Y.
	<b>Title</b>	Polymalic acid-based multi-...
	<b>Art Unit</b>	1633
	<b>Examiner Name</b>	Eppe-Smith, Janet L.
	<b>Attorney Docket Number</b>	67789-118USO (old)

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith:

☒ OR I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

48425

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I am the:

☐ Applicant/Inventor.

OR

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on \_\_\_\_\_

SIGNATURE of Applicant or Assignee of Record

Signature

Date

Name

Telephone

Title and Company

Peter E. Braveman, Senior VP for

(310) 423-6000

Legal Affairs & General Counsel Cedars-Sinai Medical Center

NOTE: Signatures of all the inventors or assignees of records of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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